Approved for use through 03/31/2007. OMB 0551-0031
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PETITI			5 no persons are required to respo IDER 37 CER 1 136(a)		of information unless it disp set Number (Optional								
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006													
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)					67456-5033-US01								
Application Number 09/904,175				Filed	Filed July 11, 2001								
For DEVICES AND METHODS FOR BIOCHIP MULTIPLEXING													
Art Unit	1634	Examiner F0	ORMAN, Betty J.		Confirmation No	1169							
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filling a reply in the above identified application.													
	requested extension an opriate fee below):	nd appropriate no	n-small-entity fee are as fo			and enter the							
			Fee	Small Entity	/ Fee								
	One month (37 CFR	1.17(a)(1))	\$120	\$60		\$							
	Two months (37 CFR	1.17(a)(2))	\$450	\$225		\$							
\boxtimes	Three months (37 CF	R 1.17(a)(3))	\$1020	\$510		\$ <u>510</u>							
	Four months (37 CF)	R 1.17(a)(4))	\$1590	\$795		\$							
	Five months (37 CFR	1 17(a)(5))	\$2160	\$1080		\$							
	Applicant claims small entity status. See 37 CFR 1,27												
	A check in the amount of the fee is enclosed.												
	Payment by credit card. Form PTO-2038 is attached.												
	The Director has already been authorized to charge fees in this application to a Deposit Account.												
WARNING	ment, to Deposit Aco	count Number :	to charge any fees whic 50-0310. I have enclose ublic. Credit card information	ed a duplica	te copy of this she	et.							
I am the applicant/inventor.													
□ assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). 3 attorney or agent of record. Registration Number 56,528 for 38,304													
							attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 56,528 for 38,304						
								Jeff Je M	Signature			Date Date	£
ROBERT J. EDESESS, JR. FOR ROBIN M. SILVA 415-442-1000													
Typed or pooled name				***************************************	Telephone Number								
	natures of all the inventors ignature is required, see b		cord of the entire interest or the	eir representati	ive(s) are required. Sub	mit multiple forms if more							
Tota	of form is subm	nitted.											

This collection of information is required by 27 CFR : 155(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO is process) are application. Confidentially is governed by 26 U.S. C. 12 and 37 CFR I 11 and 1.14. This collection is estimated to the self-or the above protective intelliging self-origing value between the self-origing. The His display of the window process are applications on the amount of time you require to complete the form and/or suggestions for reducing this burden, should be set to the Child Providence Office of U.S. Department of Commency of the Origination of Commency of Commency of the Origination of Commency of Commenc